## Interim Designation of Agent to Receive Notification of Claimed Infringement

Full Legal Name of Service Provider: St. Clair County Community College
Alternative Name(s) of Service Provider (including all names under which the service provider is doing business):  None
Address of Service Provider: 323 Erie Street Port Huron MI 48061
lame of Agent Designated to Receive lotification of Claimed Infringement: Cindy Rourke
full Address of Designated Agent to which Notification Should be Sent (a P.O. Box r similar designation is not acceptable except where it is the only address that can be used in the geographic cation):  323 Erie Street
Port Huron MT 48061
elephone Number of Designated Agent: 810.989.5642
acsimile Number of Designated Agent: 810.984.2852
mail Address of Designated Agent: crourke@stclair.cc.mi.us
tative of the Designating Service Provider.  Date: 11-28-00

Note: This Interim Designation Must be Accompanied by a \$20 Filing Fee Made Payable to the Register of Copyrights

RECEIVED

JUL 1 9 2001 COPYRIGHT OFFICE

